

BRUMBAUGH, GRAVES, DONOHUE & RAYMOND
30 Rockefeller Plaza
New York, N.Y. 10112

UNITED STATES PATENT OFFICE
F A C S I M I L E C O V E R S H E E T

Date: March 11, 1997

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MESSAGE :

PLEASE DELIVER TO RICHARD SCHWARTZ IMMEDIATELY!!

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper for Registration or Serial No. 08/087,132 is being facsimile transmitted to the Patent and Trademark Office on the date indicated below.

Rochelle K. Seide
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32,300

PTO. Reg. No.

March 11, 1997

Date

(TO BE COMPLETED IN DUPLICATE)

Amdt. Trans.

PATENT

BRUMBAUGH, GRAVES, DONOHUE & RAYMOND

30 ROCKEFELLER PLAZA

NEW YORK, N.Y. 10112-0228

TELEPHONE 212 406-2500

FACSIMILE 212 795-2512

TELEX 980 911063

RCI MAIL 911-1063

G-219 Invst. 2 - 2415/31245

Our File No. (Genzyme Dkt. IG4-9.2(FWC))Date March 11, 1997

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Gregory et al.

Serial No. : 08/087,132 Examiner: Dr. K.C. Carlson

Filed : July 2, 1993 Group Art Unit: 1814

For : NEW DIAGNOSTIC AND TREATMENT
METHODS INVOLVING THE CYSTIC
FIBROSIS TRANSMEMBRANE REGULATORAssistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-
identified application.

1. () Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
2. () A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
3. (XX) No additional fee is required.

CERTIFICATE OF FACSIMILEI hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office on March 11, 1997.

Date of Transmission

Rochelle K. Seide
Attorney Name32,300

Registration No.

Rochelle K. Seide
SignatureMarch 11, 1997

Date of Signature

G-219 1st. 2 - 2415/31245

Our File No. (Genzyme Dkt. IG4-9.2 (FWC))

The fee has been calculated as shown below:

	Claims remaining after amendmt. (Col. 1)	Highest No. prev. paid for (Col. 2)	Present extra (Col. 3)	<u>SMALL ENTITY</u>			<u>OTHER THAN A SMALL ENTITY</u>	
				<u>RATE</u>	<u>FEE</u>	<u>or</u>	<u>RATE</u>	<u>FEE</u>
Total * 2 Minus ** 133 =			0	x 11 = \$		<u>or</u>	x 22 =	5 0
Ind. * 6 Minus *** 13 =			0	x 40 =		<u>or</u>	x 80 =	0
() First Presentation of Multiple Dependent Claim				+ 130 =		<u>or</u>	+ 260 =	0
TOTAL ADDITIONAL FEE				= \$		<u>or</u>	TOTAL = \$ 0	

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.
 *** If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.

4.(a)() An Extension of Time to respond to the PTO communication dated _____ is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

	<u>SMALL ENTITY</u>	<u>OTHER THAN A SMALL ENTITY</u>
Within first month () \$ 55	() \$ 110	
Within second month () 195	() 390	
Within third month () 465	() 930	
Within fourth month () 735	() 1,470	

(check and complete the next item, if applicable)

() An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

or

(b)(X) In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

FROM

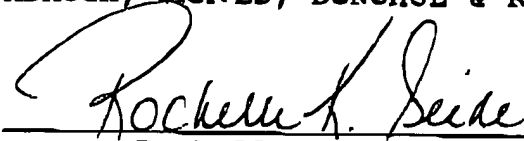
(TUE) 03. 11' 97 17:04/ST. 16:53/NO. 3561588343 P 4/11

G-219 vst. 2 - 2415/31245
Our File No. (Genzyme Dkt. IG4-9.2 (FWC))

5. () Please charge our Deposit Account No. 02-4377 in the amount of \$_____. Two copies of this sheet are enclosed.
6. () A check in the amount of \$_____ is attached.
7. (X) The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 and/or 37 CFR 1.17 associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.

BRUMBAUGH, GRAVES, DONOHUE & RAYMOND

By


Rochelle K. Seide
PTO Registration No. 32,300

Enclosures